Temperature Excursion Management and VFC Re-enrollment Webinar
October 25, 2018 @ 10:30am-11:30am

Welcome! The webinar will begin shortly.
Join the audio portion of the webinar by dialing (800) 230-1766

Note: This session will be recorded.

- The moderator will ask for your name, Pin # and facility and will add you to the call line.
- Please DO NOT place your line on “hold” while the webinar is in session.
Temperature Excursion Management and VFC Re-enrollment

Georgia Elysee, MPH
Bureau of Immunization
New York City Department of Health and Mental Hygiene
October 2018
Overview

• Vaccines for Children (VFC) Program: Orders and Excursions
  • DDL thermometer summary report upload in Citywide Immunization Registry (CIR), Online Registry, Vaccine Inventory Management Module (VIM)
  • Managing temperature excursions

• VFC Re-enrollment
  • Required annual trainings
  • Re-enrollment form
VFC Orders and Excursions
DDL Summary Report Upload in Online Registry, VIM

• As of January 1, 2018, VFC providers are required to upload DDL summary reports for each storage unit when placing their VFC vaccine order.

Please note: Effective January 1, 2018, Continuous Digital Data Logger (DDL) thermometers are required.

### Refrigerator/Freezer Information

**Storage Capacity and Modifying Storage Units**
- Please enter the storage capacity used for VFC vaccine for each unit in your practice.
- To add or remove storage units, or to edit unit information, click on the 'Modify Storage' button.

**Please note: Effective January 1, 2018, Continuous Digital Data Logger (DDL) thermometers are required.**

### Uploading a Thermometer Summary Report

- DDL thermometer summary reports should be uploaded for each storage unit at your practice.
- Summary report dates should be in accordance with your vaccine ordering tier (monthly, bi-monthly or quarterly) or should cover the time period since your last order.
  - For example, if you have two (2) storage units and order vaccines quarterly, you must upload a DDL report for each of the units covering the previous three (3) months or the dates since your last order.
  - Temperature logs are not acceptable, only upload DDL summary reports.
- To attach your temperature summary report, click on the 'Choose File' button and select the file.

**Acceptable formats:** pdf, jpeg, png, txt, xls, xlsx

### DDL Summary Report Upload

<table>
<thead>
<tr>
<th>Unit Name</th>
<th>Estimated Storage</th>
<th>Storage Used for VFC Vaccine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Test320</td>
<td>9.7 ft³</td>
<td>* 100%</td>
</tr>
<tr>
<td>Continuous DDL: Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calibration Exp. Date: 12/31/2060</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regular Stand-Alone Chest Freezer 1</td>
<td>15.0 ft³</td>
<td>* 100%</td>
</tr>
<tr>
<td>Continuous DDL: Y</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Calibration Exp. Date: 12/31/2020</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Required
DDL Summary Report Upload, cont.

• Acceptable file formats include
  • .pdf, .jpeg, .png, .txt, .xls, .xlsx

• Reports uploaded must cover the interval between the last vaccine order and the current order
  • Example:
    • Site is on a bi-monthly ordering tier
    • The site’s last order was placed on August 1st
    • Next order date is October 1st
    • Uploaded DDL report must contain readings from August 1 to October 1

• For DDLs that create multiple reports and do not contain the dates for the full VFC ordering period, combine files by:
  • Using Adobe Pro Software
  • Printing and scanning
Managing Excursions

• DDL summary reports must be submitted along with VFC vaccine orders
  • Staff review the reports submitted
    • No Excursions – Order is sent for processing immediately
    • Excursions – Staff hold the order and conduct follow-up with provider

• According to the Center for Disease Control (CDC), an excursion refers to temperature readings outside of the recommended range

<table>
<thead>
<tr>
<th>Type of Unit</th>
<th>Fahrenheit (°F)</th>
<th>Celsius (°C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refrigerator</td>
<td>36°F to 46°F</td>
<td>2°C to 8°C</td>
</tr>
<tr>
<td>Freezer</td>
<td>-58°F to 5°F</td>
<td>-50°C to -15°C</td>
</tr>
</tbody>
</table>
Excursion Follow-up

• If your unit has an excursion, your site will receive an email from VFC staff

Based on your DDL summary report submitted with your last VFC order, there were temperature excursions present in your refrigerator and/or freezer unit. I have provided guidance on what you will need to do to determine the viability of the affected vaccine.

Please note that PIN XXXXXX will remain on HOLD until:

• The email will provide guidance on determining vaccine viability
• Attached to the email will be:
  • Temperature Excursion Incident report (TEI)
  • List of vaccine manufacturers and their contact information
Common Reported Reasons for Excursions

• Power outage
• Circuit breaker
• Defrosting or cleaning the unit
• Prolonged opening of unit door
• Improper placement of probes (i.e. top shelf, walls, cold air vents, door and floor of unit)
• Unit’s temperature control knob setting is incorrect
• Poor air circulation inside and outside of the unit(s)
• Unit malfunction
• Unknown cause/spontaneous occurrence
Filling out the Temperature Excursion Incident Report
TEMPERATURE EXCURSION INCIDENT REPORT

NEW YORK CITY DEPARTMENT OF HEALTH & MENTAL HYGIENE: VACCINES FOR CHILDREN (VFC) PROGRAM
347-396-2404 (Phone) • 347-396-2559 (Fax) • nycimmunize@health.nyc.gov

In the event of any VFC temperature excursions, please complete this form and file it with the relevant temperature logs. Make sure to file any documents from the manufacturer as well. This report must be readily available if requested by the VFC Program.

ABC Pediatrics

VFC Provider Site: _______________________________ VFC PIN #: _______________________________

John Doe

Name: __________________________ Phone #: 718-888-8888 Email: johndoe@health.nyc.gov

July 1 to July 5

Date of Occurrence: __________________________ Time of Occurrence: 10 AM

131313

Order ID:
## IMMEDIATE ACTION TAKEN

1. Was the Physician In-Charge, Vaccine Coordinator or Back-up Vaccine Coordinator notified of excursion?  
   ✔ YES  ☐ NO

2. What was the temperature inside the affected storage unit(s) at the time the problem was discovered (Include Min & Max temperatures as well)? *Please note that any temperature reading outside the recommended ranges (Refrigerator – between 36°F [2°C] & 46°F [8°C]; Freezer – between -58°F [-50°C] & +5°F [-15°C]) is considered a temperature excursion.
   - Refrigerator Excursion Temperature **24°F**  
   - Min Temperature **38°F**  
   - Max Temperature **42°F**
   - Freezer Excursion Temperature **74°F**  
   - Min Temperature **2°F**  
   - Max Temperature **5°F**

3. How long were the vaccines exposed to inappropriate storage temperatures? Please record the total amount of time or cumulative time outside of range.  
   - 5 days for both Freezer and Fridge

4. What was the room temperature surrounding the affected unit at the time of the excursion?   
   - 64°F

5. Were water bottles in refrigerator & frozen coolant pacts in freezer at the time of the event?  
   ✔ YES  ☐ NO

6. Was an inventory of the vaccines within the affected storage unit conducted?  
   ✔ YES  ☐ NO

7. Were the vaccines in the affected storage unit quarantined within the unit and labeled “DO NOT USE” pending manufacturer’s input?  
   ✔ YES  ☐ NO
   *If your vaccine storage unit(s) cannot be reset to maintain the appropriate storage conditions, follow the EMERGENCY PLAN as described within the VFC Vaccine Management Plan.

8. Has the vaccine manufacturer been contacted for further guidance?  
   ✔ YES  ☐ NO
TEMPERATURE EXCURSION INCIDENT REPORT

NEW YORK CITY DEPARTMENT OF HEALTH & MENTAL HYGIENE: VACCINES FOR CHILDREN (VFC) PROGRAM

CAUSE OF EXCURSION:

☐ Power Outage Unit(s) not plugged in or not turned on
☒ Prolonged opening of refrigerator / freezer door
☐ Temperature Monitoring device moved/misplaced
☐ Unit’s temperature control knob setting is incorrect
☐ Poor air circulation inside and outside the unit(s)
☒ Operational problems with the storage unit(s)
☐ Other

Type & Brand Name of Storage Unit Affected by Excursion:

☐ Small Stand-Alone Refrigerator
☐ Small Stand-Alone Chest Freezer
☐ Stand-Alone Freezer
☐ Regular Stand-Alone Refrigerator
☐ Regular Stand-Alone Chest Freezer
☒ Pharmaceutical Grade (Stand-Alone Freezer)

☐ Pharmaceutical Grade (Combined Refrigerator & Freezer)
☐ Small Household Refrigerator & Freezer (Refrigerator Only)
☐ Regular Household Refrigerator & Freezer (Refrigerator Only)
☐ Large Household Refrigerator & Freezer (Refrigerator Only)

Storage Unit Brand Name: [Helmer Scientific] Model/Serial #: [Fridge - HMZ3092 & Freezer - HMZ3093]

Thermometer Brand Name: [VFC 400- Log Tag] Model/Serial #: [Fridge- 1789468 & Freezer- 1789467]
TEMPERATURE EXCURSION INCIDENT REPORT

NEW YORK CITY DEPARTMENT OF HEALTH & MENTAL HYGIENE: VACCINES FOR CHILDREN (VFC) PROGRAM
347-396-2404 (Phone) • 347-396-2559 (Fax) • nycimmunize@health.nyc.gov

Description of problem and actions taken:

The thermostat of the refrigerator was adjusted by a staff member since it was not holding stable temperatures. The freezer door was left open after vaccine retrieval. Our office was closed for one week and this excursion was not addressed right away. We contacted all vaccine manufacturers. Spoiled doses were reported to the City Wide Immunization registry (CIR) and returned to McKesson. All supporting documents from the manufacturers are attached.
BASED ON MANUFACTURER’S RESPONSE:

☐ Quality of VFC vaccines has not been compromised and may continue to be used.

[CONTINUE TO MANUFACTURER CASE NUMBER(S) SECTION / SIGN FORM ON PAGE 3]

☒ VFC vaccines are not approved for further use and should be identified as “spoiled”.

Manufacturer Case Number(s):

<table>
<thead>
<tr>
<th>MSD</th>
<th>PMC</th>
</tr>
</thead>
<tbody>
<tr>
<td>00837581</td>
<td>1-1489853</td>
</tr>
</tbody>
</table>

Wyeth

*PLEASE ATTACH COPIES OF ALL DOCUMENTS FROM THE MANUFACTURER STATING THE VIABILITY STATUS OF ALL VACCINES.
*DO NOT DISCARD VACCINES UNLESS DIRECTED BY THE MANUFACTURER(S).

Pediatric Influenza Vaccines, Manufacturer & Lot Number(s) affected due to temperature excursion:

<table>
<thead>
<tr>
<th>Vaccine (Manufacturer) Place an ‘X’ in box next to spoiled vaccines</th>
<th>Vaccine Type</th>
<th>Lot Number(s)</th>
<th>Lot Expiration Date</th>
<th>New Expiration Date (if applicable)</th>
<th>Number of Doses</th>
</tr>
</thead>
<tbody>
<tr>
<td>☒ Afluria® (SEQ)</td>
<td>Flu</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Afluria® (NP) (SEQ)</td>
<td>Flu</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ Fluarix® (PF) (SKB)</td>
<td>Flu</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>☐ FluMist® (NP) Quad (SKB)</td>
<td>Flu</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>☐ Fluvirin® (SEQ)</td>
<td>Flu</td>
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<tr>
<td>☐ Fluvirin® (PF) (SEQ)</td>
<td>Flu</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>☐ Fluzone® (PMC)</td>
<td>Flu</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>☒ Fluzone® (NP) (PMC)</td>
<td>Flu</td>
<td>US912CC</td>
<td>06/30/20</td>
<td>6/30/19</td>
<td>200</td>
</tr>
<tr>
<td>☐ Fluzone® Peds Dose (NP)(PMC)</td>
<td>Flu</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

(NP) = No Preservative, (PF) = Preservative Free, & Quad = Quadrivalent

Manufacturer Codes: MSD=Merck and Co., Inc., PMC=SanoFil Pasteur, SEQ=Seqirus, SKB=GlaxoSmithKline

Please note, manufacturers may provide new expiration dates for vaccines when exposed to temperatures outside of the recommended range.
<table>
<thead>
<tr>
<th>Vaccine (Manufacturer)</th>
<th>Vaccine Type</th>
<th>Lot Number(s)</th>
<th>Lot Expiration Date</th>
<th>New Expiration Date (if applicable)</th>
<th>Number of Doses</th>
</tr>
</thead>
<tbody>
<tr>
<td>ActHIB® (PMC)</td>
<td>HIB</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adacel® (PMC)</td>
<td>Tdap</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Boostrix® (SKB)</td>
<td>Tdap</td>
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<td></td>
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<tr>
<td>Cervarix® (SKB)</td>
<td>HPV</td>
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<tr>
<td>Daptacel® (PMC)</td>
<td>DTaP</td>
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<tr>
<td>Engerix B® (SKB)</td>
<td>Hep B</td>
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<tr>
<td>Gardasil® (MSD)</td>
<td>HPV</td>
<td>N021571</td>
<td>4/29/20</td>
<td>4/20/19</td>
<td>25</td>
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<tr>
<td>Havrix® (SKB)</td>
<td>Hep A</td>
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<tr>
<td>Infanrix® (SKB)</td>
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<tr>
<td>IPOL® (PMC)</td>
<td>e-IPV</td>
<td>NIK921M</td>
<td>11/14/19</td>
<td>N/A</td>
<td>100</td>
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<tr>
<td>Kinrix® (SKB)</td>
<td>DTaP-IPV</td>
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<tr>
<td>Menactra® (PMC)</td>
<td>MCV4</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Menveo® (SKB)</td>
<td>MCV</td>
<td></td>
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<td></td>
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<tr>
<td>M-M-R®II (MSD)</td>
<td>MMR</td>
<td>N020927</td>
<td>8/20/19</td>
<td>N/A</td>
<td>75</td>
</tr>
<tr>
<td>PedvaxHIB® (MSD)</td>
<td>HIB</td>
<td></td>
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</tr>
<tr>
<td>Pentacel® (PMC)</td>
<td>DTaP-IPV</td>
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<tr>
<td>Pneumovax®23 (MSD)</td>
<td>Pneumo</td>
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<tr>
<td>Prevnar 13 TM (Wyeth)</td>
<td>Pneumo</td>
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<tr>
<td>ProQuad® (MSD)</td>
<td>MMR-V</td>
<td>R 002937</td>
<td>7/29/19</td>
<td>N/A</td>
<td>100</td>
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<tr>
<td>Recombivax HB® (MSD)</td>
<td>Hep B</td>
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<td></td>
<td></td>
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<tr>
<td>Rotarix® (SKB)</td>
<td>ROTA</td>
<td></td>
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<tr>
<td>RotaTeq® (MSD)</td>
<td>ROTA</td>
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<tr>
<td>Tenivac® (PMC)</td>
<td>Td</td>
<td>A09801</td>
<td>9/14/19</td>
<td>N/A</td>
<td>50</td>
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<tr>
<td>Twinrix® (SKB)</td>
<td>Hep A-B</td>
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<td></td>
<td></td>
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<tr>
<td>Vaqta® (MSD)</td>
<td>Hep A</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varivax® (MSD)</td>
<td>VARICELLA</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Please note, the provider may have to replace vaccines distributed by the VFC program that are deemed non-viable due to provider negligence on a dose-for-dose basis.

Reminder: Do not discard spoiled doses. Report all spoiled doses in the Returns/ Wastage section of the registry and return to McKesson.

Number of Doses: 200
Excursion Next Steps

• If vaccines are viable
  • DDL summary report is analyzed to ensure stability of the unit
  • Vaccine order is processed

• If vaccines are not viable
  • Site is referred for a visit
  • Submit a one-week DDL summary report to VFC to ensure unit is stable
  • Report spoiled vaccines and number of doses in the **Returns/Wastage** tab in the VIM section of CIR
    • Receive return label via E-mail
    • Return spoiled doses to McKesson, CDC’s centralized distributor
  • Determine if revaccination is necessary; if so, generate a list to recall patients
  • VFC Staff will determine if vaccine replacement is required
<table>
<thead>
<tr>
<th>P1</th>
<th>Time</th>
<th>Date</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>37</td>
<td>11:30</td>
<td>7/11/2018</td>
<td></td>
</tr>
<tr>
<td>40.1</td>
<td>11:15</td>
<td>7/11/2018</td>
<td></td>
</tr>
<tr>
<td>42.3</td>
<td>11:00</td>
<td>7/11/2018</td>
<td></td>
</tr>
<tr>
<td>47.6</td>
<td>10:45</td>
<td>7/11/2018</td>
<td>Conducting Inventory</td>
</tr>
<tr>
<td>44.2</td>
<td>10:30</td>
<td>7/11/2018</td>
<td>Conducting Inventory</td>
</tr>
<tr>
<td>55.2</td>
<td>10:15</td>
<td>7/11/2018</td>
<td>Conducting Inventory</td>
</tr>
<tr>
<td>47.6</td>
<td>10:00</td>
<td>7/11/2018</td>
<td>Conducting Inventory</td>
</tr>
<tr>
<td>42.2</td>
<td>09:45</td>
<td>7/11/2018</td>
<td></td>
</tr>
<tr>
<td>40.2</td>
<td>09:30</td>
<td>7/11/2018</td>
<td></td>
</tr>
</tbody>
</table>
Defrosting freezer:

Medications are in the hospital pharmacy and will be stored there until proper temperatures are achieved.
Tips for Providers: Dos

• Place water bottles against the walls, in the back, on the floor, in the door racks of unit and label “Do Not Drink”
• Clean unit regularly and check door seals, coils, vents, etc.
• Ensure buffered probe is placed in the center of the unit
• Plug in one unit per electrical outlet
• Perform daily inspection of storage units
• Advise staff to never disconnect power
• Label circuit breakers
• Install/set audible temperature alarms
Tips for Providers: Don’ts

• Do not leave unit open for an extended period of time
• Do not overcrowd unit
• Do not use power outlets such as multi-outlet power strips with an off button, wall switch activation, etc.
• Do not store vaccines in dormitory-style, bar-style units or in the freezer section of a household combination unit
• Do not store food or beverages in unit
• Do not allow untrained staff to reset thermostat of unit
Tips for Providers (I)

Temperature **Warmer** than 46°F/8°C in Refrigerator:
- Power supply
- Door/door Seal
- Overcrowding of vaccines
- Temperature monitoring device probe
- Thermostat setting
- Circulation behind the unit
- Coils
- Room temperature
- Unit usage/stock

Temperature **Colder** than 36°F/2°C in Refrigerator:
- Temperature monitoring device probe
- Thermostat setting
- Room temperature
- Unit usage/stock
Tips For Providers (II)

Temperature **Warmer** than 5°F/-15°C in Freezer

Check:
- Automatic Defrost
- Ice buildup
- Power supply
- Door seal
- Thermostat setting
- Circulation behind the unit
VFC Re-enrollment
VFC Re-enrollment

• Providers are required to re-enroll in the VFC program **annually**

• 2019 Re-enrollment
  • Opened on Friday, October 5, 2018
  • Deadline for completion is Friday, **November 30, 2018**
  • Vaccine ordering privileges will be suspended for providers who do not re-enroll by the deadline
Required Annual Trainings

The CDC ‘You Call the Shots’ trainings/courses must be completed by:

- Physician-in-Charge (PIC)
- Vaccine Coordinator (VC)
- Back-up Vaccine Coordinator (BVC)

- Only certificates with a 2018 date will be accepted
  - Vaccine Storage and Handling (WB2897)
  - Vaccines for Children (WB2898)

- Instructions on how to complete the trainings can be found on the Bureau of Immunization website
Accessing *You Call the Shots* Trainings

**Accessing You Call The Shots Training Modules**
NYC DOHMH Vaccines For Children Program: Annual Training Requirement

The Physician In-Charge, Vaccine Coordinator, & Backup Vaccine Coordinator Must Complete This Training Annually

**A. Steps To Taking The Course**

1. Go to the first course link below (#1a) and then follow #2-4 and then go to the second course link (#1b) and follow # 2-4.
   a. *You Call the Shots: Vaccine Storage and Handling – 2018* (Course #WB2897)
      Can be found here: [https://www2a.cdc.gov/nip/isd/ycts/mod1/courses/sh/ce.asp](https://www2a.cdc.gov/nip/isd/ycts/mod1/courses/sh/ce.asp)
   b. *You Call the Shots: Vaccines for Children (VFC)-2018* (Course #WB2898)
      Can be found here: [https://www2a.cdc.gov/nip/isd/ycts/mod1/courses/vfc/ce.asp](https://www2a.cdc.gov/nip/isd/ycts/mod1/courses/vfc/ce.asp)

2. Click on the blue icon that reads 'Continue'

3. Take the course (if you have to stop and come back note where you left off and forward to that section when you come back)

4. Repeat steps 1-3 for second course (link #1b)

5. Once you are done with both courses, proceed to section B. If you have already set up a CDC training account, proceed to section C.
Log-in or Create an Account
Verify Account

Security Questions

Please answer the questions below to verify your account.

Note: If you have forgotten the answers to your security questions, Contact TCEO

* In what city were you born?

* In what city was your father born?

Next
Verify Account

Government Warning

You are accessing a U.S. Government information system, which includes (1) this computer, (2) this computer network, (3) all computers connected to this network, and (4) all devices and storage media attached to this network or to a computer on this network. This information system is provided for U.S. Government-authorized use only. Unauthorized or improper use of this system may result in disciplinary action, as well as civil and criminal penalties. By using this information system, you understand and consent to the following:

- This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this Government system, which includes (1) this computer network, (2) all computers connected to this network, and (3) all devices and storage media attached to this network or to a computer on this network.
- This system is provided for Government-authorized use only.
- Unauthorized or improper use of this system is prohibited and may result in disciplinary action and/or civil and criminal penalties.
- Personal use of social media and networking sites on this system is limited as to not interfere with official work duties and is subject to monitoring.
- By using this system, you understand and consent to the following:
  - The Government may monitor, record, and audit your system usage, including usage of personal devices and email systems for official duties or to conduct HHS business. Therefore, you have no reasonable expectation of privacy regarding any communication or data transiting or stored on this system. At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this system.
  - Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

I Agree  I Do Not Agree
## Registering for the Courses (I)

### Search Courses

Use at least one of the following search options. Scroll down for search results.

- **Topic/keyword/course number:** WB2897
- **CE type:** -Any-
- **Date of conference/live event:** -Any-

### Results present the newest courses at the top (in order by start date). Click on the column headers in the table to sort results by course type, course title, or course number.

- **Total results:** 1

<table>
<thead>
<tr>
<th>Course Type</th>
<th>Course Title and Description</th>
<th>Course Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Web Based</td>
<td>Immunization: You Call the Shots-Module Ten-Storage and Handling - 2018 (Web-based)</td>
<td>WB2897</td>
</tr>
</tbody>
</table>
Registering for the Courses (II)

Immunization: You Call the Shots - Module Ten: Storage and Handling - 2018 (Web-based)

Course Complete

Course: WB2897
UAN #: 0387-0000-18-033-H06-P
CE Expiration: 12/31/2018, 11:59 PM (ET)
Available CE: CME, CNE, CEU, CPD, CHES, CPE

You Call the Shots is a series of interactive, web-based, immunization training courses that present practice-oriented immunization content in a step-by-step, self-study format. These courses are ideal for medical or nursing students, new vaccination providers, or seasoned health care providers seeking a review.

You Call the Shots consists of a series of modules that discuss vaccine-preventable diseases and the latest recommendations for vaccine storage, administration, and use. Each module provides learning opportunities, self-test knowledge checks, reference and resource materials, and an extensive glossary.

This module is the 10th in the series and focuses on vaccine storage and handling requirements.

Continue
Registering for the Courses (III)

TCEO

Select CE for Your Course

Select your continuing education type. You may select more than one. Depending on the type of CE you select, you may be prompted to provide additional information.

- 1.25 CME (physicians)
- 1 CNE (nurses)
- 0.1 CEU (other professionals)
- 1 CPH (public health professionals)
- 1 CHES (certified health education specialists)
- 0.06 CPE (pharmacists)

Save and Continue
Steps for Taking the Courses (I)
Step for Taking the Courses (II)

Immunization Education & Training

You Call The Shots

Web-based Training Course

Note: You Call the Shots is updated regularly to include the latest guidelines and recommendations in vaccine practice. The latest modules are below. Come back every month for the latest training to stay up to date on the immunization practice.

At a Glance

You Call the Shots is an interactive, web-based immunization training course. It consists of a series of modules that discuss vaccine-preventable diseases and explain the latest recommendations for vaccine use. Each module provides learning opportunities, self-test practice questions, reference and resource materials, and an extensive glossary.

Need Continuing Education or a Certificate?

To receive continuing education (CE) or print a certificate, please visit TCEQ and follow these 2 Simple Steps. If you do not need CE, but require a certificate for training requirements, please select CEU as the type of continuing education you’d like to earn.

Now Available

- Diphtheria, Tetanus, and Pertussis (DTap) Mar 2016
- Hemophilus influenzae type b (Hib) Jul 2013
- Herpes Simplex virus (HSV) May 2017
- Herpes Simplex virus II (HSV II) Mar 2016
- Human Papillomavirus (updated to reflect October 2016 ACIP vote) Feb 2017
- Influenza (updated to reflect 2017-2018 recommendations) Sep 2017
- Meningococcal Jun 2018
- MRV Jul 2015
- Pneumococcal Feb 2016
- Polio Oct 2015

- Vaccines For Children (VFC) Jan 2018
- Vaccine Storage and Handling Jan 2018

- Varicella Sep 2016
- Zoster Mar 2018
Steps for Taking the Courses (III)
Steps for Taking the Courses (IV)

Continuing Education Information

You have completed this course. In order to receive continuing education (CE), please visit TCEO and follow these 9 Simple Steps. If you do not need CE, but require a certificate for training requirements, please select CEU as the type of continuing education you’d like to earn.

For course content-related questions, contact Nipinfo@cdc.gov.

For CE-related questions, contact MBarnett2@cdc.gov. For assistance with the Training and Continuing Education Online system, call (800) 41-TRAIN Monday through Friday, 8:00 AM to 4:00 PM Eastern Time, or send an e-mail to CE@cdc.gov.

Additional Information about CE credit can be found in this module’s introductory page.
Evaluation and Post-Test (I)
Evaluation and Post-Test (II)

Training and Continuing Education Online (TCEO)

WB2898 - Posttest - Immunization: You Call the Shots-Module Sixteen-Vaccines for Children Program - 2018 (Web-based)

Minimum passing score: 80%

You must complete the test in a single session.
Evaluation and Post-Test (III)

• CDC’s Training and Continuing Education Online System allows 2 attempts to take the posttest
  • The 2nd attempt must be completed within 30 days of the first trial
  • If you fail both attempts, you will not earn a continuing education credit or a certificate
  • CDC is not able to reopen the post-tests
Retrieving Your Certificates (I)

My Activities
Welcome Georgia Elysee.
This page is where you can track your CE activities in progress, under Pending CE, and review those that are completed, under Completed CE.

To earn CE for courses:
- Under Pending CE, click on the course Evaluation and complete it.
- Click on the Posttest and complete it. If you don’t pass the Posttest, you will have one opportunity to retake it.
- Return to the Completed CE section of the My Activities page to download your certificate.

To earn CE for conferences:
- Complete the evaluation for each session you attended and the Entire Conference evaluation.
- Return to the Completed CE section of the My Activities page to download your certificate.

If you completed all requirements to earn CE, you can select the course again to change your enrollment.

Pending CE
Search courses to sign up for CE.

Completed CE

<table>
<thead>
<tr>
<th>Course Description</th>
<th>Date</th>
<th>CEU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Immunization: You Call the Shots-Module Ten-Storage and Handling - 2018 (Web-based)</td>
<td>3/21/2018</td>
<td>0.1 CEU</td>
</tr>
</tbody>
</table>

Download Certificate
The Centers for Disease Control and Prevention (CDC) certifies that
Georgia Elysee
has participated in the educational activity
Immunization: You Call the Shots-Module Ten-Storage and Handling - 2018 (Web-based)
WB2897
and is awarded
0.1 ANSI/IACET Continuing Education Units (CEUs)
(Ten 60 minute contact hours equal one CEU)
03/21/2018

The Centers for Disease Control and Prevention is authorized by IACET to offer 0.1 CEU’s for this program.

Gabrielle Benson
Chief Education and Training Services Branch
Continuing Education
Centers for Disease Control and Prevention
1600 Clifton Road NE, MS E-92
Atlanta, GA 30333

The Centers for Disease Control and Prevention (CDC) certifies that
Georgia Elysee
has participated in the educational activity
Immunization: You Call the Shots-Module Sixteen-Vaccines for Children Program - 2018 (Web-based)
WB2898
and is awarded
1 Contact Hour(s)
on 09/11/2018

The Centers for Disease Control and Prevention is accredited as a provider of Continuing Nursing Education by the American Nurses Credentialing Center’s Commission on Accreditation.

Gabrielle Benson
Chief Education and Training Services Branch
Continuing Education
Centers for Disease Control and Prevention
1600 Clifton Road NE, MS E-92
Atlanta, GA 30333
Retrieving Your Certificates (III)
Retrieving Your Certificates (IV)

Please note that each certificate file must have a unique name.

For example:
- For the PIC
  - PIC_Storage_2018
  - PIC_VFC_2018
- For the VC
  - VC_Storage_2018
  - VC_VFC_2018
- For the BVC
  - BVC_Storage_2018
  - BVC_VFC_2018
Accessing the 2019 Re-enrollment Form

• To access the Re-enrollment Form, log onto the CIR Online Registry: https://immunize.nyc/provider-client/servlet/PC

• Be sure to use Google Chrome Web browser for optimal functionality when logged into the registry.
Accessing the 2019 Re-enrollment Form

Please enter your User ID and Password

User ID: gelysee1
Password: ********

To obtain a User ID and Password, each health care facility or practice must designate a Facility Security Administrator. The Security Administrator must be associated with a licensed physician, physician’s assistant or nurse practitioner, or must be a registered professional nurse or pharmacist who administers vaccines pursuant to NYS Public Health Law Section 2168. The Security Administrator must mail or fax a signed confidentiality statement to the CIR. Call us at 347-396-2400 for more information or download the sign up forms from here.

In proceeding beyond this point, the user:
- acknowledges the possibility that the information contained herein may be incorrect or incomplete.
- acknowledges that the medical decision to immunize or test a child for lead rests with the health care provider, based on the child’s current health status and past medical history.
- agrees to report immunizations and lead test results in accordance with NYS Public Health Law Section 2168/NYC Health Code Section 11.07 and Section 11.09.
- agrees to look up information only on his/her current patients, and to comply with the restrictions on the disclosure of information from the Online Registry in accordance with NYC Health Code Section 11.11.

By clicking the button below, you consent to the above

News and Highlights
- VFC Program update, June 2017
- VIM - Provider FAQs

Online Registry Resources
- Recall patients with text messaging via the Online Registry: New!
- Choose custom parameters New!
Accessing the 2019 Re-enrollment Form

The VFC Reenrollment process is now open until November 30, 2018. If not completed by this date, vaccine ordering privileges will be suspended. Please read the notice that was sent out to providers.

To complete this form, please update and enter information below. You may use the tab button to proceed through the fields. For further guidance on how to complete the 2019 VFC Re-enrollment form, please click here. If you have any questions about VFC re-enrollment please email nycimmunize@health.nyc.gov or call 347-396-2404.

Provider Annual VFC Re-enrollment
* - Required Fields

Practice/Group Practice/Clinic/Facility

VFC PIN: VFCCIR  Facility Name: CITY IMMUNIZATION REGISTRY

Shipping Address

Shipping Address refers to the address where vaccines are shipped. Please note that the Shipping Address and the address of the shipping contact must be the same.

Vaccine Delivery Address 1: 2 GOTHAM 5TH FLOOR
City: LONG ISLAND CITY  State: NY  Zip Code: 11101
Telephone #: (347) 396-2400  Ext:  Fax #: (655) 555-5556
2019 VFC Re-enrollment Form

• Most sections are pre-populated with data submitted the previous year
  • Review the form to ensure that all information is accurate
  • If there are any changes, update the form before submitting
  • Changes to the form can be saved by clicking on the “Save” button at the bottom of the page

• Required fields are indicated with a red asterisk(*)

• If there are any errors on your form
  • You will receive a notification of them when you attempt to submit the form
  • You will need to fix these errors to proceed with submission
The VFC Reenrollment process is now open until November 30, 2018. If not completed by this date, vaccine ordering privileges will be suspended. Please read the notice that was sent out to providers.

To complete this form, please update and enter information below. You may use the tab button to proceed through the fields. For further guidance on how to complete the 2019 VFC Re-enrollment form, please click here. If you have any questions about VFC re-enrollment please email nycimmunize@health.nyc.gov or call 347-536-2404.

Provider Annual VFC Re-enrollment

* - Required Fields

Practice/Group Practice/Clinic/Facility

VFC PIN: VFCCIR  Facility Name: CITY IMMUNIZATION REGISTRY

Shipping Address

Shipping Address refers to the address where vaccines are shipped. Please note that the Shipping Address and the address of the shipping contact must be the same.

Vaccine Delivery Address 1: 2 GOTHAM
Vaccine Delivery Address 2: 5TH FLOOR
City: LONG ISLAND CITY  State: NY  Zip Code: 11101
Telephone #: (347) 396-2400  Ext:  Fax #: (555) 665-5555
Email Address: SHIUUE@HEALTH.NYC.GOV  Cell Phone #: 
Shipping Hours

Shipping hours refer to the days/times when your facility can receive vaccine shipments. If the days/times below are incorrect, please update. Every day (Monday-Friday) must be accounted for (if there are no shipping hours for a day, please indicate the office is closed). Providers must be on site with appropriate staff to receive vaccine at least one day a week other than Monday, and for at least four consecutive hours on that day.

First Open Interval

<table>
<thead>
<tr>
<th>Day</th>
<th>Office is closed/no deliveries</th>
<th>From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td></td>
<td>09:00</td>
<td>05:00</td>
</tr>
<tr>
<td>Tuesday</td>
<td>✅</td>
<td>09:15</td>
<td>12:00</td>
</tr>
<tr>
<td>Wednesday</td>
<td></td>
<td>08:00</td>
<td>12:00</td>
</tr>
<tr>
<td>Thursday</td>
<td></td>
<td>09:00</td>
<td>05:00</td>
</tr>
<tr>
<td>Friday</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Second Open Interval

<table>
<thead>
<tr>
<th>Day</th>
<th>From</th>
<th>To</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>01:00</td>
<td>03:45</td>
</tr>
</tbody>
</table>

Delivery Instructions (if applicable): [Test Delivery Instructions]

Vaccines Offered (select only one box)

- Offers all ACIP Recommended Vaccines for children 0 through 18 years of age.
- Offers Select Vaccines (This option is only available for facilities designated as Specialty Providers by the VFC Program)

A "Specialty Provider" is defined as a provider that only serves (1) a defined population due to the practice specialty (e.g., OB/GYN, STD clinic, family planning) or (2) a specific age group within the general population of children ages 0-18. Local health departments and pediatricians are not considered specialty providers. The VFC Program has the authority to designate VFC providers as specialty providers. At the discretion of the VFC Program, enrolled providers such as pharmacies and mass vaccinators may offer only influenza vaccine.

If you offer only select vaccines, please indicate below which vaccines you offer:

- DTaP
- Hepatitis A
- Hepatitis B
- Hib
- HPV
- Influenza
- Meningococcal B
- Meningococcal Conjugate
- MMR
- Pneumococcal Conjugate
- Pneumococcal Polysaccharide
- Rotavirus
- Td
- Tdap
- Varicella
Training Requirement

All persons holding the titles of Physician in Charge, Vaccine Coordinator, and Back-up Vaccine Coordinator must take the following two trainings: "You Call the Shots: Vaccine Storage and Handling Training Module 10" (Course #WB2755) and "You Call the Shots: Vaccines for Children (VFC) Training Module 16" (Course #WB2757). Only certificates for trainings completed in 2018 will be accepted for 2019 re-enrollment. For further guidance on how to take these training courses, retrieve your certificates, and/or upload them to this section, click here.

Physician-in-Charge

<table>
<thead>
<tr>
<th>Storage and handling</th>
<th>File: PC_Storage_Certificate.pdf</th>
<th>Choose File</th>
<th>No file chosen</th>
</tr>
</thead>
<tbody>
<tr>
<td>VFC</td>
<td>File: PC_VFC_Certificate.pdf</td>
<td>Choose File</td>
<td>No file chosen</td>
</tr>
</tbody>
</table>

Vaccine Coordinator

<table>
<thead>
<tr>
<th>Storage and handling</th>
<th>File: VC_Storage_Certificate.pdf</th>
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<tbody>
<tr>
<td>VFC</td>
<td>File: VC_VFC_Certificate.pdf</td>
<td>Choose File</td>
<td>No file chosen</td>
</tr>
</tbody>
</table>
Vaccine Recipient Agreement

Consent

Please read the Vaccine Recipient Agreement form carefully. By clicking "I agree" below you confirm that you will comply with VFC requirements. Failure to comply with the agreement will prevent you from ordering VFC vaccine. The agreement can also be downloaded or printed here.

VACCINE RECIPIENT AGREEMENT

In order to participate in the New York City (NYC) Vaccines for Children (VFC) Program and/or receive Federally/State/City procured vaccines provided to me at no cost, I and all practitioners employed by this medical office, group practice, HMO, health department, community/migrant/rural clinic, or other entity of which I am the physician-in-charge or equivalent, agree to the following:

I Agree

Continue →
Thank you for re-enrolling in the VFC Program. Your VFC Re-enrollment id number is 2975.

Your re-enrollment form was submitted by Georgia Elysee on 10/02/2018 at 11:21am. A copy has been e-mailed to SHUUE@HEALTH.NYC.GOV.

A copy of your re-enrollment form is below. Please print this page for your records.

Please e-mail nycimmunize@health.nyc.gov with your CIR facility code and/or VFC PIN if you have questions.

<table>
<thead>
<tr>
<th>Provider Annual VFC Re-enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Facility Name:</strong> CITY IMMUNIZATION REGISTRY</td>
</tr>
<tr>
<td><strong>VFC PIN:</strong> VFCIR</td>
</tr>
<tr>
<td><strong>Shipping Address:</strong></td>
</tr>
<tr>
<td>Vaccine Delivery Address 1: 2 GOTHAM</td>
</tr>
<tr>
<td>Vaccine Delivery Address 2: 5TH FLOOR</td>
</tr>
<tr>
<td>City: LONG ISLAND CITY</td>
</tr>
<tr>
<td>Telephone #: (347) 398-2400</td>
</tr>
<tr>
<td>Email Address: <a href="mailto:SHUUE@HEALTH.NYC.GOV">SHUUE@HEALTH.NYC.GOV</a></td>
</tr>
</tbody>
</table>

Facility Classification:
- Practice Type: Pediatric
- Funding Class: Public
- Facility Type: Hospital
The VFC Reenrollment process is now open until November 30, 2018. If not completed by this date, vaccine ordering privileges will be suspended. Please read the notice that was sent out to providers.

Your re-enrollment form was submitted by Georgia Elysee on 10/02/2018 at 11:21am. A copy of your re-enrollment form is below. Your VFC Re-enrollment Id number is 2975.

If you have any questions about VFC re-enrollment please e-mail nycimmunize@health.nyc.gov or call 347-396-2404.

If you would like to make changes to your re-enrollment form, please click the "Amend" button.
For Re-enrollment help, please contact the Bureau of Immunization, Provider Quality Assurance (PQA) unit

Phone: 347-396-2404
Email: nycimmunize@health.nyc.gov